

Centers for Disease Control and Prevention (CDC) Atlanta GA 30341-3724

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## To Whom It May Concern:

Since the 1970s, CDC has partnered with public health nutrition programs across the country, especially WIC, to operate the Pediatric Nutrition Surveillance System and the Pregnancy Nutrition Surveillance System (PedNSS and PNSS). These systems extract data that are routinely collected for other purposes and process them into meaningful data on trends and differentials in nutritional status and behaviors. In 2009, CDC and USDA initiated a process to carefully examine the utility and efficiency of these systems. After considerable deliberation, CDC has concluded that the benefits of the systems no longer merit their costs. As such, CDC plans to discontinue operation of the systems in the Fall of 2012 after production of the 2011 reports. A number of considerations have contributed to this decision:

- When created, there were no existing systems to monitor nutritional behaviors or status, and thus these systems filled a critical gap in documenting nutrition outcomes across the U.S. Since then, numerous population-based systems have been created that allow for monitoring of nutrition in various target groups: NHANES, NHIS, NIS, PRAMS, BRFSS, and YRBS. Additionally, periodic surveys have provided critical in-depth snapshots of nutrition, including FDA's Infant Feeding Practices Study and the National Survey of Children's Health. Because these systems are population-based, they show patterns not just among low-income populations, but also allow for comparisons to middle- and upper-income populations as well.
- In the beginning, the systems also provided a much-needed data processing function that took paper-and-pencil forms and converted them to nutritional indicators. Now, all state WIC programs operate computerized management information systems with abilities to query various statistics on an ad hoc basis. Additionally, USDA has created the biennial WIC Participant Characteristics (PC) study, which provides comparable statistics across all states on most of the indicators provided in PedNSS and PNSS.
- The simultaneous operation of PedNSS/PNSS and the WIC PC study creates a
  duplication of effort at the federal and state level. Two federal agencies are processing
  similar data and producing reports on similar indicators. States are burdened with
  extraction and troubleshooting for three different record layouts and reporting schedules.
- In response to the obesity epidemic, CDC has made the strategic decision to focus on effecting environmental change. It is clear that the epidemic has been created by a changing environment, and if we are to reverse the epidemic, new policies and an improved environment will be necessary. CDC's attention in surveillance is increasingly focused on how to measure these environmental and policy changes.

• Many of today's research questions are related to how to change the environment or what the effect of environmental/policy changes are on behaviors, but PedNSS and PNSS lack data on the environment.

We recognize that discontinuation of these systems will leave some gaps in meeting information needs at the federal, state, and local level. CDC is committed to working with USDA and state health departments to identify ways to modify existing systems (esp. WIC PC) to fill these gaps. While this change will no doubt be painful for some, we believe that this decision is in the best interest of efficiency in government. CDC takes seriously its mission to be good stewards of taxpayer resources and believes that the resources currently expended on PedNSS/PNSS can make greater contributions to public health through other initiatives.

PedNSS and PNSS have served the nation's public health for over 35 years. It is now time to focus on future data needs and ways to meet these needs in new and creative ways.

Sincerely,

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Director

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